Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

10698810

| 70070010   |  |   |                      |  |                     |                  |        |                   |                        |        |                            |                        |
|--|--|---|----------------------|--|---------------------|------------------|--------|-------------------|------------------------|--------|----------------------------|------------------------|
|  |  | CLAIMS AS                                 | S FILED -<br>(Column |  | (Column 2)          |                  |        | SMALL ENTITY TYPE |                        | OR     | OTHER THAN OR SMALL ENTITY |                        |
| то   | TAL CLAIMS                                     |   | 111                  |  |                     |                  | ٠      | RATE              | FEE                    |        | RATE                       | FEE                    |
| FOR  |  |   | NUMBER FILED         |  | NUMBER EXTRA        |                  |        | BASIC FEE         | 385.00                 | OR     | BASIC FEE                  | 770.00                 |
| то   | TAL CHARGEA                                    | BLE CLAIMS                                | ☑ minus 20=          |  | * 2 i               |                  |        | X\$ 9=            |                        | OR     | X\$18=                     | 378                    |
| INDEPENDENT CLAIMS   |  |   | 6 mir                | nus 3 =                                | * 3                 |                  |        | X43=              |                        | OR     | X86=                       | 150                    |
| MU   | LTIPLE DEPEN                                   | DENT CLAIM PI                             | RESENT               | ·· · · · · · · · · · · · · · · · · · · |                     |                  |        | .4.45             |                        |        | . 200                      | A) D                   |
| * If the difference in column 1 is less than zero, enter   |  |   |                      |  | "0" in c            | olumn 2          |        | +145=             |                        | OR     | +290=                      | 1110                   |
|  |  |   |                      |  |                     |                  |        | TOTAL             |                        | OR     | TOTAL                      | 140 6                  |
| CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)  |  |   |                      |  |                     |                  |        | SMALL             | ENTITY                 | OR     | OTHER<br>SMALL             |                        |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                      | HIGH<br>NUM<br>PREVIO<br>PAID          | EST<br>BER<br>DUSLY | PRESENT<br>EXTRA |        | RATE              | ADDI-<br>TIONAL<br>FEE |        | RATE                       | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus                | **                                     |                     | =                |        | X\$ 9=            |                        | OR     | X\$18=                     |                        |
|  | Independent                                    | *   | Minus                | ***                                    |                     | =                |        | X43=              |                        | OR     | X86=                       | 1                      |
| ٩  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                      |  |                     |                  |        | +145=             |                        | OR     | +290=                      |                        |
| 9,13,29,33,38  |  |   |                      |  |                     |                  |        | TOTAL             |                        | - 8    | TOTAL                      |                        |
| (Column 1) (Column 2) (Column 3)   |  |   |                      |  |                     |                  |        | ADDIT. FEE        |                        | OR     | ADDIT. FEE                 |                        |
|  |  | 1 .                                       |                      |  |                     |                  |        |                   |                        |        |                            |                        |
| AMENDMENT B  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                      | HIGH<br>NUM<br>PREVIO<br>PAID          | BER<br>DUSLY        | PRESENT<br>EXTRA |        | RATE              | ADDI-<br>TIONAL<br>FEE |        | RATE                       | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus                | **                                     |                     | =                |        | X\$ 9=            |                        | OR     | X\$18=                     |                        |
|  | Independent                                    | *   | Minus                | ***                                    |                     | =                |        | X43=              |                        | OR     | X86=                       |                        |
| ۷_   | FIRST PRESENTATION OF MULTIPLE DEPENDENT C     |   |                      |  | CLAIM               |                  | 1      | . 1 45            |                        |        | +290=                      |                        |
|  |  |   |                      |  |                     |                  | l      | +145=<br>TOTAL    |                        | OR     | TOTAL                      |                        |
|  |  |   |                      |  |                     |                  | ,      | ADDIT. FEE        |                        | OR     | ADDIT. FEE                 |                        |
|  | (Column 1) (Column 2) (Column 3)               |   |                      |  |                     |                  |        |                   |                        |        |                            |                        |
| AMENDMENT C  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | ·                    | HIGH<br>NUM<br>PREVIO<br>PAID          | BER<br>DUSLY        | PRESENT EXTRA    |        | RATE              | ADDI-<br>TIONAL<br>FEE |        | RATE                       | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus                | **                                     |                     | =                |        | X\$ 9=            |                        | OR     | X\$18=                     |                        |
|  | Independent                                    | *   | Minus                |  |                     | =                |        | X43=              |                        | OR     | X86=                       |                        |
| Ĺ  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                      |  |                     |                  |        | +145=             |                        |        | +290=                      |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  |  |   |                      |  |                     |                  |        | +145=<br>TOTAL    |                        | OR     | TOTAL                      |                        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." |  |   |                      |  |                     |                  |        | ADDIT. FEE        |                        | OR     | ADDIT. FEE                 |                        |
|  | ir the Highest Nur<br>The "Highest Nurr        | mber Previously Pai                       | d For" (Total or     | Independ                               | ent) is the         | highest numbe    | er fou | ind in the app    | ropriate box           | in col | lumn 1.                    |                        |